



Business Membership Application

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____

Phone Number: _____

Email: _____

Option 1: \$1000: _____

50 Golf Passes. Each valid for 18 holes any day of the week. *Expire 12.31.2024*

Option 2: \$1850: _____

50 Golf Passes. Each valid for 18 holes with cart any day of the week. *Expire 12.31.2024*

Supplemental Cards may be purchased with Option 1 or 2. You may purchase supplemental cards up front with the initial purchase, or later in the season.

Supplemental Option 1: \$400: _____

20 Golf Passes. Each valid for 18 holes any day of the week. *Expire 12.31.2024*

Supplemental Option 2: \$740: _____

20 Golf Passes. Each valid for 18 holes with cart any day of the week. *Expire 12.31.2024*

Signature: _____ **Date:** _____

Remit Application with payment to:

Stagg Hill Golf Club

Attn: Business Membership

4441 Stagg Hill Road

Manhattan, KS. 66502